



# SIXTH STREET ELECTRONIC GATEWAY SIGN ADVERTISING CONTRACT

Organization/Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## Advertising Options

### Non-Profits:

**Option 1:**  One Month - \$300 |  One Quarter (3 months) - \$900 |  One Year - \$3,600

**Option 2:**  One Month - \$150 |  One Quarter (3 months) - \$450 |  One Year - \$1,800  
 Please bill monthly (For Option 1 & 2)

### For-Profits:

**Option 1:**  One Month - \$400 |  One Quarter (3 months) - \$1,200 |  One Year - \$4,800

**Option 2:**  One Month - \$200 |  One Quarter (3 months) - \$600 |  One Year - \$2,400

**Option 3:**  One Month - \$100 |  One Quarter (3 months) - \$300 |  One Year - \$1,200  
 Please bill monthly (For Option 1, 2 & 3)

Sign is live from 4am to 12am daily.

Ads will display for 6 seconds. **Option 1** - Rotates every 3 min. @ 400 displays p/day:

**Option 2** - Rotates every 6 min. @ 200 displays p/day: **Option 3** - Rotates every 12 min. @ 100 displays p/day

### Please Make Check Payable to: City of Norco

Please run my advertisement from (date): Begin: \_\_\_\_\_ End: \_\_\_\_\_  
mm / dd / yyyy mm / dd / yyyy

Entire Message Requested (6 words maximum):  
\_\_\_\_\_

Can you provide a high-resolution version of the graphics or logo desired?  Yes  No

CERTIFICATION: I hereby certify that I am authorized to submit this request by the organization/business entity identified above. On behalf of the requesting organization, it is agreed that the City of Norco will not be held liable for any actions, including errors and omissions, in the processing, potential denial or implementation of this advertising request, including the ultimate display of the message.

I understand that ad location on the digital signage system is at the discretion of the City of Norco. I understand and agree that the City of Norco shall determine the appropriateness of any advertisement provided by me and the City of Norco reserves the right at its sole discretion to reject the format, form and/or content of my advertisement or to otherwise refuse to place my advertisement. If the City of Norco determines not to accept my advertisement, my payment will be returned to me. I agree that payment in full for my ad will be made to the City of Norco and that my advertisement will not run until payment in full is made. I understand that once my ad is paid in full, there are no refunds with the exception of the aforementioned.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Mail, Email or Hand-Deliver Application to:

Diana McGrew • 747 7th St. • Norco, CA 92860 • 951-805-5995 • norcogatewaysign@gmail.com

### For Office Use Only

Date Received: \_\_\_\_\_ Check  # \_\_\_\_\_ Cash  Amount Received: \_\_\_\_\_